



County of Los Angeles CHIEF EXECUTIVE OFFICE

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August 21, 2007

To: Supervisor Zev Yaroslavsky, Chairman
Supervisor Gloria Molina
Supervisor Yvonne B. Burke
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: William T Fujioka
Chief Executive Officer

A handwritten signature in black ink, appearing to read "W. T. Fujioka", is written over the printed name.

STATUS REPORT ON MARTIN LUTHER KING, JR.-HARBOR HOSPITAL EMPLOYEE COMPETENCY DOCUMENTATION REVIEW

Pursuant to your Board's direction, a Review Team, consisting of 25 to 35 staff from the Department of Health Services (DHS), the Department of Human Resources (DHR), and my office are conducting a review of documentation on file for employees with clinical assignments at Martin Luther King, Jr.-Harbor Hospital (MLK-H) who may be impacted by the workforce reduction plan. This memorandum is to provide your Board with a status of our progress.

A list of all employees assigned to MLK-H as of August 12, 2007 resulted in the following employee numbers. Of a 1,596 total employee count, 918 employees have been identified by DHS as being in classifications potentially impacted by the workforce reduction plan. All employees in any potentially impacted class are being included in the review, since employees who may be affected as part of the workforce reduction plan have not yet been identified.

Of the estimated 918, 750 are clinical employees, whose personnel files are being reviewed for current performance evaluations and review of other documents related to competency assessment, and 168 are credentialed and privileged staff, whose files will not be included in this Review Team's performance evaluation and competency review. A separate review will be conducted at a later date.

The remaining 678 employees are in non-clinical classifications, some of which will remain at MLK-H and some of which will be mitigated through various actions based on the finalized MLK-H staff plan.

Credentialed and Privileged Staff (168 employees)

There are 168 credentialed and privileged employees whose files do not need to be reviewed for competency documentation by the current Review Team. The Review Team will be reviewing these files for current performance evaluations once the initial review of the 750 employee files has been completed. Staff that are subject to the credentialing and privileging process include all physician staff, dentists, podiatrists, physician assistants, nurse practitioners, nurse midwives, certified registered nurse anesthetists, and audiologists.

The competency review of these employees will be conducted by a senior level physician review team. DHS is currently developing the review plan for these employees and will inform your Board of the details and timeline of this plan. Competency review of these positions consists of two components:

- 1) Credentialing review is completed prior to appointment and every two years thereafter. The review includes validation of training, education and any licensure, certification, registration and/or permits required for the area of specialty for the privileges they are applying for.
- 2) Privileging - is a competency review that is done through a peer-review process, which takes place upon initial appointment and every two years thereafter. The peer-review process includes a review of patient files to determine if care provided by the individual met the community standard.

Clinical Employees Subject to Potential Mitigation/Workforce Reduction Plan (750 employees)

I. Performance Evaluation Review

Personnel files are being reviewed for current performance evaluations reflecting a minimum performance rating of competent. Of the 750 employees, 694 personnel files have been reviewed for current performance evaluations. Of these files, 152 did not contain current performance evaluations. DHS is in the process of identifying where these performance evaluations are; this number is expected to decrease. DHS is in the process of locating the additional 56 personnel files not yet reviewed for current performance evaluations.

II. Competency Documentation Review

The Review Team is verifying that current documentation is available for DHS to substantiate that competency factors have been validated and that any required licenses, certificates, registrations and/or permits are current for each employee as required by their job classification and work assignment.

Employee competency documentation for the 750 clinical employees has been or will be reviewed as follows:

- 306 total Registered Nurses, Licensed Vocational Nurses and Surgical Technician files need review for core competency documentation. Additionally, for those assigned to specialty units, additional review is needed for specialty competency documentation. As of August 20, 2007, 92 employee records had been reviewed for both core and specialty competencies, 86 employee records have been reviewed for core competencies only, and 32 employee records have been reviewed for specialty competencies only. Not all employee assignments require specialty competency testing.
- 166 total ancillary staff files are being reviewed for competency documentation.
- As 85 staff in the patient financial services series are providing clinical support services only, employee files are being reviewed for current performance evaluation documentation only, and not core or specialty competency assessments.
- 171 Nursing Attendant files will be reviewed for competency documentation.
- A review will be conducted of the remaining 22 employee files to determine if competency requirements are applicable.

The Review Team will continue with this process until the review is completed. We will continue to provide your Board with status updates of this review.

Each Supervisor
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If you have questions or need additional information, please contact me or your staff may contact Sheila Shima at (213) 974-1160.

WTF:SRH:SAS
DJ:bjs

c: Executive Officer, Board of Supervisors
 County Counsel
 Director and Chief Medical Officer, Department of Health Services
 Director of Personnel